

07/09/01

P21205.P01, UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. P21205	Total Pages
		Inventor(s) or Application Identifier Tatsuo GOTOH	
		Title: AUTOMATIC SURVEYING SYSTEM	
ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231			
APPLICATION ELEMENTS		ACCOMPANYING APPLICATION PARTS	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. a. <input type="checkbox"/> Small Entity Statement(s)</p> <p>3. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) [Total Pages <u>59</u>] - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p><input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets <u>13</u>]</p> <p><input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>3</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) <input type="checkbox"/> Unexecuted b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 20 completed) [Note Box 6 below] i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Incorporation By Reference (useable if Box 5b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p><input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p><input type="checkbox"/> CD-Rom or CD-R in duplicate, large table or Computer Program (Appendix)</p>		<p>9. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p>10. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>11. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>12. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>13. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>14. <input type="checkbox"/> Preliminary Amendment</p> <p>15. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>16. <input checked="" type="checkbox"/> Figure of Drawing to be published <u>3</u></p> <p>17. <input checked="" type="checkbox"/> Foreign priority claimed a. <input checked="" type="checkbox"/> Claim of Priority b. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)</p> <p>18. <input checked="" type="checkbox"/> Assignee: <u>ASAHI SEIMITSU KABUSHIKI KAISHA of Tokyo, JAPAN</u></p> <p>19. <input checked="" type="checkbox"/> Other: <u>Request for Examiner Approval of Drawing Amendment (with one sheet).</u></p>	
<p>20. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior Application No. _____, filed _____. Prior application information: Examiner: _____ Group Art Unit: _____</p>			
<p>21. <input type="checkbox"/> Amend the specification by inserting before the first line the sentence: This application is a <u> </u> continuation-in-part, <u> </u> continuation, <u> </u> divisional, of Application No. _____, filed _____.</p>			

jc821 U.S. PTO
09/900013
07/09/01

Address all future correspondence to **Customer No. 7055** at the present address of:

GREENBLUM & BERNSTEIN, P.L.C.
1941 Roland Clarke Place
Reston, VA 20191
(703) 716-1191

7/9/01
Date

Bruce H. Bernstein Reg. No. 33,329
Signature

Bruce H. Bernstein, Reg No. 29,027
Typed or Printed Name

FEE TRANSMITTAL		Complete if Known	
		Application Number	Not Yet Assigned
		Filing Date	Concurrently Herewith
		First Named Inventor	T. GOTOH
		Group Art Unit	Unassigned
		Examiner Name	Unassigned
TOTAL AMOUNT OF PAYMENT (\$) <u>750.00</u>		Attorney Docket Number	P21205

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																																																		
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <u>19-0089</u></p> <p>Deposit Account Name <u>GREENBLUM & BERNSTEIN, P.L.C.</u></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17, including any required extension of time fees in any concurrent or future reply requiring a petition for extension of time for its timely submission (37 CFR 1.136(a)(3))</p> <p><input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b)</p> <p><input type="checkbox"/> Applicant Claims Small Entity Status See 37 CFR 1.27.</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p style="text-align: center;">FEE CALCULATION (fees effective 12/29/99)</p> <p>1. FILING FEE</p> <table style="width:100%;"> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <td>101</td> <td>710</td> <td>201</td> <td>355</td> <td>Utility filing fee</td> <td><u>710</u></td> </tr> <tr> <td>106</td> <td>320</td> <td>206</td> <td>160</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107</td> <td>490</td> <td>207</td> <td>245</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108</td> <td>710</td> <td>208</td> <td>355</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114</td> <td>150</td> <td>214</td> <td>75</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1) (\$)</td> <td><u>710</u></td> </tr> </table> <p>2. CLAIMS</p> <table style="width:100%;"> <tr> <th>Total Claims</th> <th>Independent Claims</th> <th>Multiple Dependent Claims</th> <th>Extra</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> <tr> <td>9</td> <td>-20=</td> <td></td> <td>0</td> <td>x 18</td> <td>= 0</td> </tr> <tr> <td>1</td> <td>-3=</td> <td></td> <td>0</td> <td>x 80</td> <td>= 0</td> </tr> <tr> <td colspan="5"></td> <td>0</td> </tr> </table> <table style="width:100%;"> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102</td> <td>80</td> <td>202</td> <td>40</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104</td> <td>270</td> <td>204</td> <td>135</td> <td>Multiple dependent claim</td> <td></td> </tr> <tr> <td>109</td> <td>80</td> <td>209</td> <td>40</td> <td>Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2) (\$)</td> <td><u>0.00</u></td> </tr> </table>	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	101	710	201	355	Utility filing fee	<u>710</u>	106	320	206	160	Design filing fee		107	490	207	245	Plant filing fee		108	710	208	355	Reissue filing fee		114	150	214	75	Provisional filing fee		SUBTOTAL (1) (\$)					<u>710</u>	Total Claims	Independent Claims	Multiple Dependent Claims	Extra	Fee from below	Fee Paid	9	-20=		0	x 18	= 0	1	-3=		0	x 80	= 0						0	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	103	18	203	9	Claims in excess of 20		102	80	202	40	Independent claims in excess of 3		104	270	204	135	Multiple dependent claim		109	80	209	40	Reissue independent claims over original patent		110	18	210	9	Reissue claims in excess of 20 and over original patent		SUBTOTAL (2) (\$)					<u>0.00</u>	<p>3. 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169	900	169	900	Request for expedited examination of a design application																																																																																																																																																																																																																																																																																																															
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SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name		Bruce H. Bernstein		Reg. Number	29,027
Signature				Date	7/9/01
		Reg No 33,329		Deposit Account User ID	